Exhibit 272 [replacing Dkt. #1964-60] attached to Plaintiffs' Memorandum of Law in Support of Motion for Partial Summary Adjudication that Defendants did not Comply with Their Duties under the Federal Controlled Substances Act to Report Suspicious Opioid Orders and Not Ship Them (Second Corrected) at Dkt. #1910-1.

• Redactions withdrawn by Defendant

EXHIBIT 272

Case: 1:17-md-02804-DAP Doc #: 2841-26 Filed: 10/17/19 4 of 10. PageID #: 427209 P1.1817.2

MSKESSON

Empowering Healthcare

Threshold Change Form

Immediate Change Request $Y/N\underline{Y}$	Anticipated Effective Date: 12/19/08
Date: 12/19/08	
Customer Name: GIANT EAGLE 0209 Address: 900 NORTHFIELD RI BEDFORD OH 44146 DEA number:BG7987982 Customer Account number:918023	<u>D</u>
Provide Economost number, Description, 1	NDC or Base Code Change in selling unit or percentage
1. CS requested:9193 HYDROCOD	Increase amount 25%
2. CS requested:	Increase amount 25%
3. CS requested:	Increase amount
4. CS requested:	Increase amount
5. CS requested:	Increase amount
Current Threshold 1.	
2. 3. 4. 5.	
Denied By:	Date:
Approved by:	
DCMBlaine Snider	Date: 12-19-08
Sales	Date:
TCR Giant Eagle 4012 121908	

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MCKESSON

Empowering Healthcare

Regulatory dg Date: 12/19/08

TCR Giant Eagle 4012 121908

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MIZVEDDOM

Empowering Healthoare

RNA -Threshold Change/Level 1 Form

*NOTE: Areas in Bold are MANDATORY *

Request for threshold change Y/N? Y Temp/Perm? Perm Level 1 Notification? Anticipated Effective Date: 12/19/08 (Attach list if necessary) Customer Name: Giant Eagle Corporate Contact Name: Greg Carlson Address: Title: Director Pharmacy Sourcing Phone: 412-963-2564 Has account reached monthly threshold Y/N? DEA number: Has Level One been conducted Y/N?	
Anticipated Effective Date: 12/19/08 (Attach list if necessary) Customer Name: Giant Eagle Corporate Contact Name: Greg Carlson Address: Title: Director Pharmacy Sourcing Phone: 412-963-2564 Has account reached monthly threshold Y/N?	
Address: Title: Director Pharmacy Sourcing Phone: 412-963-2564 Has account reached monthly threshold Y/N?	
Address: Title: Director Pharmacy Sourcing Phone: 412-963-2564 Has account reached monthly threshold Y/N?	
Phone: 412-963-2564 Has account reached monthly threshold Y/N?	
Has account reached monthly threshold Y/N?	
Customer Account number: See attached If contact different than above, List here:	
Provide Economost number, Description or Base Code Dosage amount or percentage	
1. CS requested: 9193,9143 +/- amount25%	
2. CS requested: +/- amount	
3. CS requested: +/- amount	
4. CS requested: +/- amount	
5. CS requested: +/- amount	
Reason for requested change (BE SPECIFIC, include supporting documentation):	
McKesson use only	
1. Has threshold been changed on the same product within the last three months? N	
2. If Yes, List dates:	
Current Threshold	
1.	
2.	
3.	
4.	
5.	
Ammunut/Denis I	
Approval/Denial by:	
DCM Date:	

Giant Eagle Threshold Change Form_Store list_12_19_08Giant Eagle Threshold Change Form_Store list_12_19_08

MCKMDL00555488

Home DC	Chain	License	Account	Page 1	Name	Base Code	Description	Monthly Threshold	MTD Accumulator	Threshold%	INCREASE
8772	431	BG0531079	784637	GIANT	EAGLE #0008	9193	HYDROCODONE	25000	20952	83.81	25%
8772	431	BG2576796	790139	GIANT	EAGLE #2415	9193	HYDROCODONE	16000	14748	92.18	25%
8772	431	BG3196260	395608	GIANT	EAGLE #4012	9143	OXYCODONE	15000	14134	94.23	25%
8772	431	BG3196260	395608	GIANT	EAGLE #4012	9193	HYDROCODONE	19000	15444	81.28	
8772	431	BG7987982	918023	GIANT	EAGLE #0209	9193	HYDROCODONE	8000	6448	80.6	25%
8772	431	FG0153433	343114	GIANT	EAGLE #5863	9143	OXYCODONE	8000	6400	80	20%



Martin, Diane

From:

Snider, Blaine

Sent:

Saturday, December 20, 2008 2:56 PM

To:

Martin, Diane

Subject:

FW: Giant Eagle CSMP Thresholds

Attachments: Giant Eagle Threshold Change Form_Store list_12_19_08.doc; GE CSMP Thresholds_Store

list 12 19 08.xls

fyi

Blaine Snider
Director of Operations
New Castle, Pa
724.924.9959
blaine.snider@mckesson.com

From: Gustin, Dave

Sent: Friday, December 19, 2008 2:42 PM

To: Cook, Sabrina; Snider, Blaine

Cc: Bishop, Micheal; Oriente, Michael; Thomet, Elaine

Subject: FW: Giant Eagle CSMP Thresholds

Done per regst attached. Please file as appropriate Blaine.

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Dave Gustin, DRA North Central Region

cell 937 402 0834

From: Cook, Sabrina

Sent: Friday, December 19, 2008 2:26 PM **To:** Gustin, Dave; Bishop, Micheal; Jonas, Tracy

Cc: Bishop, Micheal; Thomet, Elaine

Subject: FW: Giant Eagle CSMP Thresholds

Team:

I'm not sure who is in this week so I decided to send it to all of you. Attached is Giant Eagle TCR form and spreadsheet of stores. I am out Monday so I want to have them processed before I take off. Thanks.

1/6/2009

Sabrina Cook Account Manager/Support Solutions 972-446-4563 Tel

From: Carlson, Gregory [mailto:Greg.Carlson@gianteagle.com]

Sent: Friday, December 19, 2008 12:14 PM

To: Cook, Sabrina; Casar, Donald

Subject: RE: Giant Eagle CSMP Thresholds

Sabrina

All the hydrocodones need to be bumped by 25%. This is all due to the out of stock situation on the vicodin from last month (filling owes). Also bump the two with the Oxycodone. 4012 had a recent acquisition so their volume is way up and 5863 is experiencing greater than average growth. Increase 4012 by 25% and 5863 by 20%.

Thanks Greg

From: Cook, Sabrina [mailto:Sabrina.Cook@McKesson.com]

Sent: Friday, December 19, 2008 1:05 PM **To:** Carlson, Gregory; Casar, Donald **Subject:** Giant Eagle CSMP Thresholds

Team:

The below stores have hit above 80%. Please let me know if there is business reason for an increase. I am off Monday, so I will need to process today an increase is needed. Thanks.

Home DC	Chain	License	Account	Name	Base Code	Description
8772	431	BG0531079	784637	GIANT EAGLE #0008	9193	HYDROCODONI
8772	431	BG2576796	790139	GIANT EAGLE #2415	9193	HYDROCODONI
8772	431	BG3196260	395608	GIANT EAGLE #4012	9143	OXYCODONE
8772	431	BG3196260	395608	GIANT EAGLE #4012	9193	HYDROCODONI
8772	431	BG7987982	918023	GIANT EAGLE #0209	9193	HYDROCODONI
8772	431	FG0153433	343114	GIANT EAGLE #5863	9143	OXYCODONE

Sabrina Cook Account Manager/RNA Support Solutions

McKesson Corporation 1220 Senlac Drive Carrollton, Texas 75006

972.446.4563 Tel 972.446-5493 Fax 800.369.0039 Toll 214.552.4257 Cell

Sabrina.Cook@McKesson.com

1/6/2009

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1/6/2009